01-21-05

PART B - FEE(S) TRANSMITTAL

OIPE JAN 19 2005 PATENT & TRADEMARK OFFICE

Complete and send this form, together with applicable fee(s), to: Mail **Mail Stop ISSUE FEE**
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01933 7590 11/18/2004

FRISHAUF, HOLTZ, GOODMAN & CHICK, PC
767 THIRD AVENUE
25TH FLOOR
NEW YORK, NY 10017-2023

01/24/2005 HDEMESS2 00000104 09853298

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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.

(Depositor's name)
(Signature)
(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/853,298	05/10/2001	Nancy P. Camacho	00328/RSB	6040

TITLE OF INVENTION: DETERMINATION OF THE ULTRASTRUCTURE OF CONNECTIVE TISSUE BY AN INFRARED FIBER-OPTIC SPECTROSCOPIC PROBE

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	~~$1370~~ $700	$300	$1670	02/18/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
SMITH, RUTH S	3737	600-473000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).
☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. **Use of a Customer Number is required.**

2. For printing on the patent front page, list
(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.
1 FRISHAUF, HOLTZ, GOODMAN & CHICK, P.C.
2
3

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE: HOSPITAL FOR SPECIAL SURGERY

(B) RESIDENCE: (CITY and STATE OR COUNTRY): New York, New York

Please check the appropriate assignee category or categories (will not be printed on the patent) : ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:
☒ Issue Fee
☒ Publication Fee (No small entity discount permitted)
☒ Advance Order - # of Copies 4

4b. Payment of Fee(s):
☒ A check in the amount of the fee(s) is enclosed. (check No. 95687 for $1,012.00)
☐ Payment by credit card. Form PTO-2038 is attached.
☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 06-1378 (enclose an extra copy of this form).

5. **Change in Entity Status** (from status indicated above)
☒ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.
NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature Richard S. Barth Date January 19, 2005

Typed or printed name Richard S. Barth Registration No. 28,180

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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JAN 19 2005
PATENT & TRADEMARK OFFICE

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appl. No. : 09/853,298

Applicant(s): Nancy P. CAMACHO et al

Filed : May 10, 2001

For : DETERMINATION OF THE ULTRASTRUCTURE OF CONNECTIVE TISSUE...

Art Unit : 3737

Examiner : Ruth S. Smith

Docket No. : 00328/RSB

Customer No.: 01933

CONFIRMATION NO.: 6040

"Express Mail Mailing Label No.: EV 584632612 US
Date of Deposit: January 19, 2005
I hereby certify that this paper is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to Mail Stop Issue Fee, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

Francine E. Smith

Francine E. Smith

In the event that this Paper is late filed, and the necessary petition for extension of time is not filed concurrently herewith, please consider this as a Petition for the requisite extension of time, and to the extent not tendered by check attached hereto, authorization to charge the extension fee or any other fee required in connection with this paper, to Account No. 06-1378.

LETTER TRANSMITTING ISSUE FEE

Commissioner for Patents
S I R :

ATTN.: MAIL STOP ISSUE FEE

Enclosed is the completed and signed PART B - FEE(S) TRANSMITTAL PTOL-85, together with a check in the amount of $1012.00 in payment of the Issue Fee ($700.00 - small entity fee), Publication fee ($300.00) and 4 copies of the printed patent ($12.00).

Respectfully submitted,

Richard S. Barth

RICHARD S. BARTH
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